

## **Application Data Sheet**

### **Application Information**

Application Number::	Unassigned
Filing Date::	July 29, 2003
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R::	None
Title::	CYCLOOXYGENASE-2 SELECTIVE INHIBITORS, COMPOSITIONS AND METHODS OF USE
Attorney Docket Number::	102258.158US2
Request for Early Publication?::	No
Request for Non Publication?::	No
Total Drawing Sheets:	0
Small Entity?::	No
Petition Included?::	No
Secrecy Order in Parent Application?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full Capacity
Given Name::	David
Middle Name::	S.
Family Name::	Garvey
City of Residence::	Dover
State or Province of Residence::	Massachusetts
Country of Residence::	U.S.
Street of mailing address::	10 Grand Hill Drive
City of mailing address::	Dover

State or Province of mailing address:: Massachusetts  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 02030

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Subhash  
Middle Name:: P.  
Family Name:: Khanapure  
City of Residence:: Clinton  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.  
Street of mailing address:: 3 Colonial Drive  
City of mailing address:: Clinton  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 01510

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: Ramani  
Middle Name:: R.  
Family Name:: Ranatunge  
City of Residence:: Lexington  
State or Province of Residence:: Massachusetts  
Country of Residence:: U.S.  
Street of mailing address:: 11 Bates Road  
City of mailing address:: Lexington  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 02421

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Great Britain  
Status:: Full Capacity  
Given Name:: Stewart  
Middle Name:: K.  
Family Name:: Richardson  
City of Residence:: Tolland  
State or Province of Residence:: Connecticut  
Country of Residence:: U.S.  
Street of mailing address:: 55 Autumn Drive  
City of mailing address:: Tolland  
State or Province of mailing address:: Connecticut  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 06084

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: Joseph  
Middle Name:: D.  
Family Name:: Schroeder  
City of Residence:: Minneapolis  
State or Province of Residence:: Minnesota  
Country of Residence:: U.S.  
Street of mailing address:: 2305 W. 52<sup>nd</sup> Street  
City of mailing address:: Minneapolis  
State or Province of mailing address:: Minnesota  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 55410

### **Correspondence Information**

Correspondence Customer Number:: 25270  
Phone number:: 202-942-8400  
Fax number:: 202-942-8484

### **Representative Information**

Representative Customer Number::	25270	
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### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This application	Nonprovisional	60/398,829	July 29, 2002

### **Assignment Information**

Assignee Name:: NitroMed, Inc.  
Street of mailing address:: 12 Oak Park Drive  
City of mailing address:: Bedford  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 01730